PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/580,653			ing Date 30/2007	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)									OTHER THAN SMALL ENTITY OR SMALL ENTITY				
	FOR	NU	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A]	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E or (q))	N/A		N/A			N/A			N/A		
TO (37	FAL CLAIMS CFR 1.16(i))		minus 20 =		•			x \$ =		OR	x s =		
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *					x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$2: addit	If the specification and drawin sheets of paper, the applicatio is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37			n size fee due for each thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										J			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	05/06/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 3	Minus	 20		= 0		X \$26 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 1	Minus	3		= 0		X \$110 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))												
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus					x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***				x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. If the "Highest Number Previously Paid For M THIS SPACE is less than 30, enter "20". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For M THIS SPACE is less than 3, enter "3". If the "Highest Number Previ													

has collection of information is origined by 37 CFR 1,10. The information is required to obtain or retain a benefit by the public which is in the final representation of the process and any potential of the process and any potential or confident in the process and any potential or confident in the process and any potential or completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, about the south of the first many confidential of the process of the pro Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.